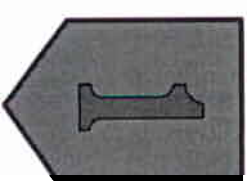




ENLISTED PERSONNEL MANAGEMENT ELECTRONIC SOP

Low-Cost Move (LCM)



Eligibility Criteria:

- Must be serving in an overseas long or short tour area & have 1 year retainability (May request an exception to policy)
- The cost to the government cannot exceed \$500
- Must not be flagged (unless command-directed)

Documentation Required:

- DA Form 4187
- Memorandum of recommendation by BDE/Sep BN Cdr or DA Form 4187-1-R
- Enlisted Records Brief (ERB), not more than 60 days old
- Letter of Acceptance (gaining command when a specific unit is requested)
- Letters from Finance, Housing, and Transportation offices

Approval Authority:

1st PERSCOM

Disapproval Authority:

1st PERSCOM or G1, Enlisted Personnel Management, 11D

PERSONNEL ACTION

For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the proponent agency is ODCSPER

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 5, Section 3012; Title 10, USC, E.O. 9397.
PRINCIPAL PURPOSE: Used by soldier in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).
ROUTINE USES: To initiate the processing of a personnel action being requested by the soldier.
DISCLOSURE: Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.

1. THRU (Include ZIP Code) Commander Battalion Address	2. TO (Include ZIP Code) Commander 1st Infantry Division ATTN: AETV-BGA-EPM APO AE 09036	3. FROM (Include ZIP Code) Commander Unit Address
--	--	---

SECTION I - PERSONAL IDENTIFICATION

4. NAME (Last, First, MI) ANY SOLDIER	5. GRADE OR RANK/PMOS/AOC E-5/75H	6. SOCIAL SECURITY NUMBER 000-11-4444
--	--------------------------------------	--

SECTION II - DUTY STATUS CHANGE (AR 600-8-6)

7. The above soldier's duty status is changed from _____ to _____
 _____ effective _____ hours, _____ 19 _____

SECTION III - REQUEST FOR PERSONNEL ACTION

8. I request the following action: (Check as appropriate)

<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Retesting in Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify) Request Low-Cost Move
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	

9. SIGNATURE OF SOLDIER (When required)

10. DATE

SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)

1. IAW AR 614-30, para 4-2, request a Low-Cost Move* from _____ to _____.

REASON:

* NOTE: Only single/unaccompanied soldiers meet the criteria for a Low-Cost Move

2. The following information is provided:

CURRENT DEROS: _____ **ETS DATE:** _____ **MARITAL STATUS:** _____ **# DEPNS:** _____**EFMP DEPNS:** _____ **REQUESTED REPORT DATE:** _____

3. I am/am not on assignment instructions to _____, with a report date of _____.

4. Early Report Authorization is/is not requested.

5. I understand that the cost of this move cannot exceed \$500, including per diem travel, unaccompanied baggage, household goods, and dislocation allowance. I further understand that I may not waive my entitlement benefits authorized by JFTR.

6 Encl(s)

1-2. Memorandum of recommendation by BDE/Sep BN Cdr or DA Form 4187-1-R & Enlisted Records Brief (ERB)

3. Letter of Acceptance (gaining command when a specific unit is requested)

4-6. Letters from Finance, Housing, and Transportation offices

SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL

11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -

☐ HAS BEEN VERIFIED
 ☐ RECOMMEND APPROVAL
 ☐ RECOMMEND DISAPPROVAL
 ☐ IS APPROVED
 ☐ IS DISAPPROVED

12. COMMANDER/AUTHORIZED REPRESENTATIVE

13. SIGNATURE

14. DATE